

215 ILCS 5/355.2 Dental Coverage in Accident and Health Policies

Sec. 355.2. Dental coverage reimbursement rates.

- (a) Every company that issues, delivers, amends, or renews any individual or group policy of accident and health insurance on or after the effective date of this amendatory Act of 1991 that provides dental insurance and bases payment for those benefits upon a usual and customary fee charged by licensed dentists must disclose all of the following:
 - (1) The frequency of the determination of the usual and customary fee.
 - (2) A general description of the methodology used to determine usual and customary fees.
 - (3) The percentile that determines the maximum benefit that the company will pay for any dental procedure, if the usual and customary fee is determined by taking a sample of fees submitted on actual claims from licensed dentists and then determining the benefit by selecting a percentile of those fees.
- (b) The disclosure must be provided upon request to all group and individual policy holders and group certificate holders. All proposals for dental insurance must notify the prospective policy holder that information regarding usual and customary fee determinations is available from the insurer. All employee benefit descriptions or supplemental documents must notify the employee that information regarding reimbursement rates is available from the employer.

(Source: P.A. 87-587.)